

RALF Program
AP & Ombudsman Meeting
May 24, 2012



Medicaid Central Office

Licensing & Certification

Residential Care Assisted Living Program

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Website Information

- **State Statutes - Idaho Code (IC)**
- **State Rules - Idaho Administrative Procedures Act (IDAPA)**
- **RALF Informational Letters**
- **Frequently Asked Questions**
- **Reportable Incident Guidelines**
- **Past Presentations**
- **Facility Lists**
- **Facility Survey/Inspection Reports**
- **Facility Excellence Awards**
- **List of Unsprinklered Facilities**
- **Quality Assurance Checklists**
- **Online Courses**

RALF Program's Mission

To ensure the residents of Idaho's RALFs receive quality care in a safe, humane, home-like living environment where their rights are protected.



RALF Guidelines

- Idaho Statute: Title 39 Chapter 33
- IDAPA 16.03.22

RALF Surveyors



Polly Watt-Geier MSW



Karen Anderson RN



Rae Jean McPhillips, RN



Donna Henscheid LSW



Maureen McCann RN



Rachel Corey, RN



Matt Hauser, QMRP



Gloria Keathley LSW

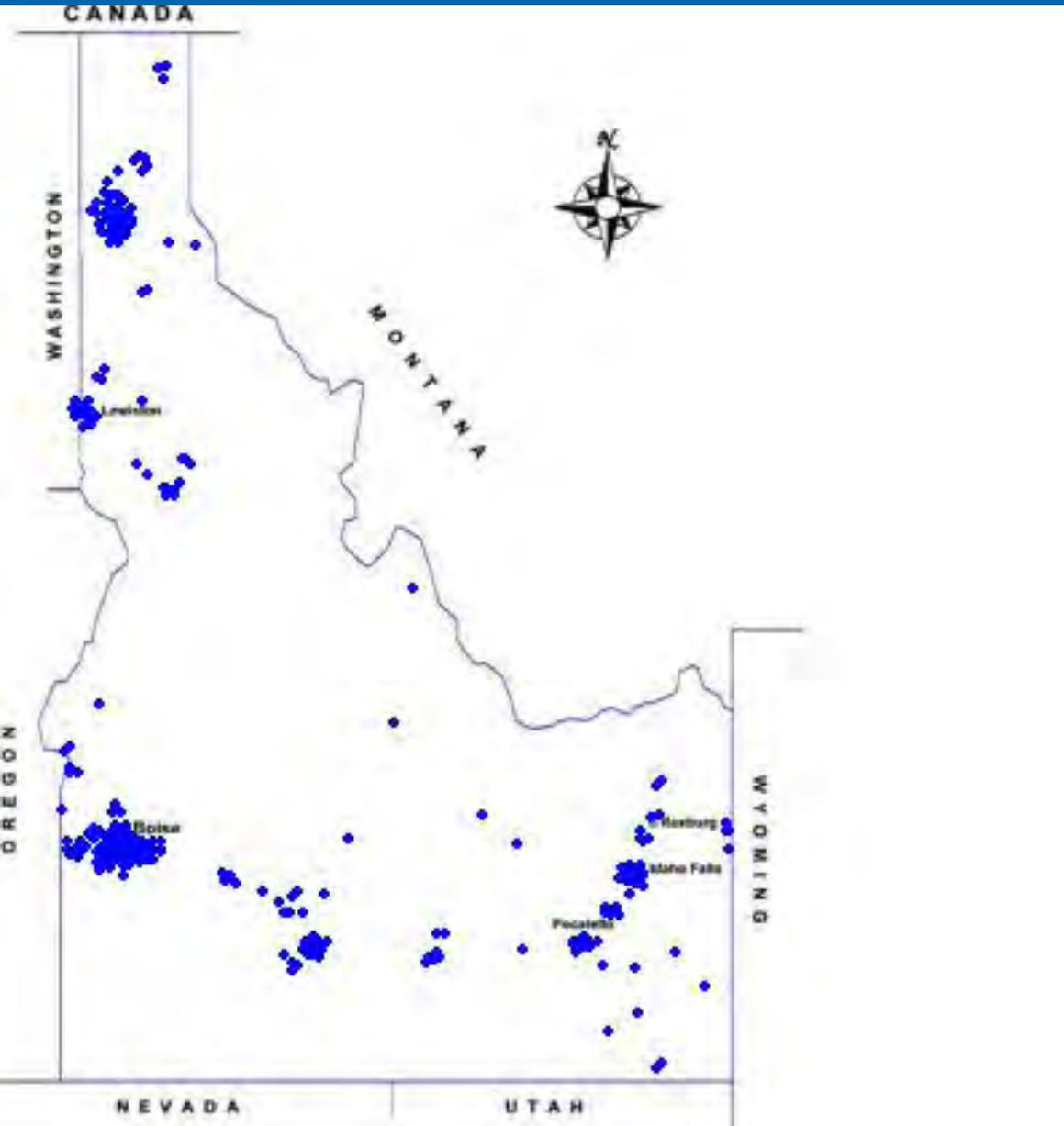


Residential Care or Assisted Living Facility (RALF):

A facility or residence...for the purpose of providing necessary supervision, personal assistance, meals and lodging to 3 or more adults.

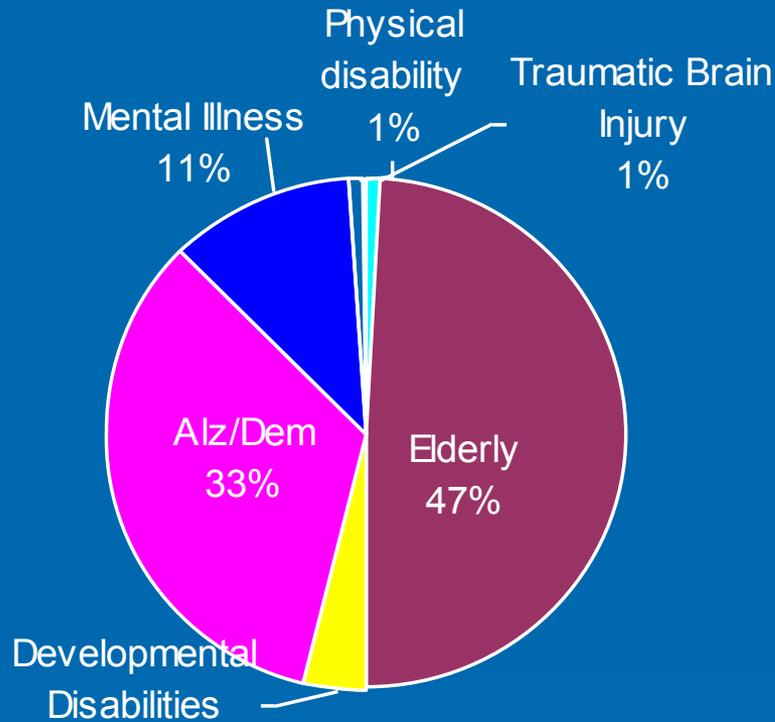


RALFs in Idaho



RALFs
statewide: 347

Who lives in RALFs?



New Licenses 2011

New licensures: 27

6 new facilities

5 conversions

13 changes of ownership

+3 Additions/increased capacity

234 new beds

New beds by region:

I: 46

II: 16

III: 0

IV: 108

V: 48

VI: 0

VII: 16



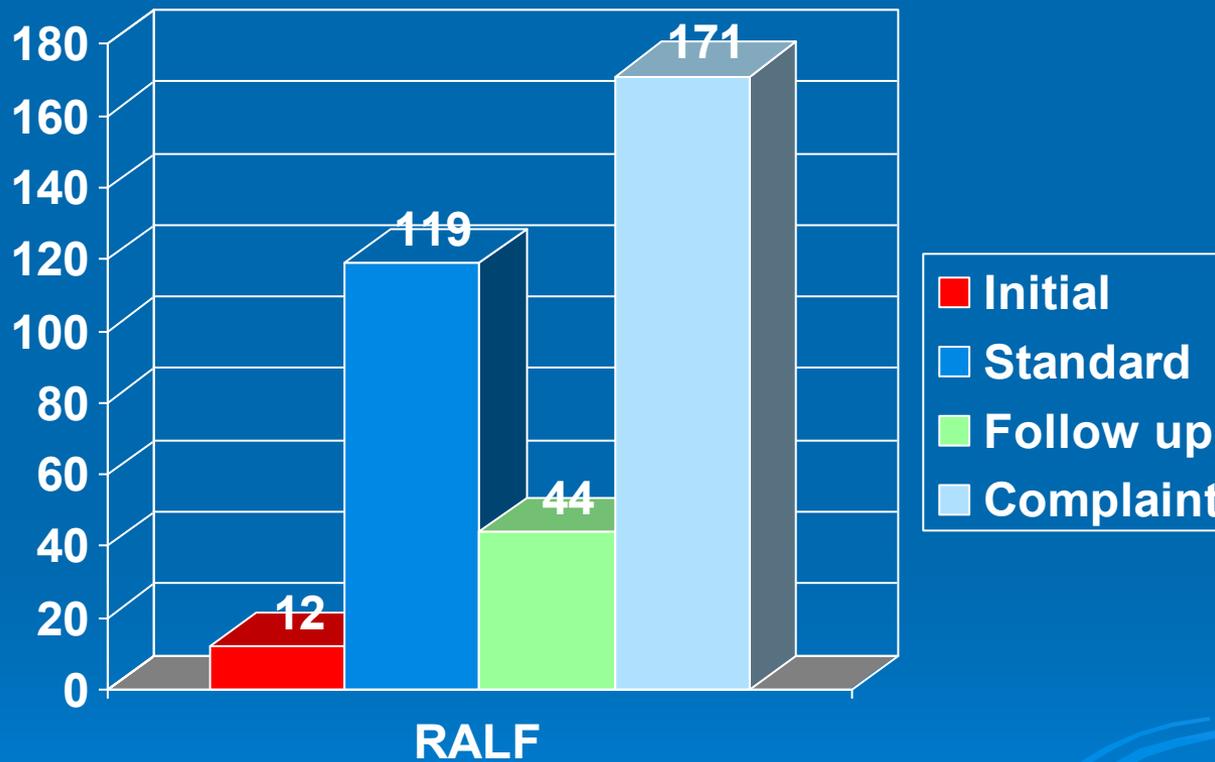
Current Applications: 8 changes of ownership,
3 new construction, 6 expansion, 8
conversions for additional 263 new beds



Surveys

1. **Health Care Licensure Survey**
 - ❖ Outcome oriented survey process
 - ❖ Tour, observations, interviews, resident and staff record reviews, environment, Idaho food code
 - ❖ Annually or every 36 months if no core deficiency for 2 consecutive surveys
2. **Complaint Investigations:** 2 days, 60 days or next visit
3. **Follow-Up surveys:** 45-90 days after core
4. **Initial Surveys:** 90 days after 1st admission
5. **Fire Life Safety:** Annually or every 36 months if no core deficiency for 2 consecutive surveys

Surveys Completed 2011



Deficiencies

Core Issue deficiency

- abuse; neglect; exploitation; inadequate care; more than 30 days without a licensed administrator; inoperable fire detection or extinguishing systems with no fire watch; surveyors denied access

Non-core issue deficiency

(punch list)

- All other non-compliance with rules that does not rise to level of core issue.

Core Deficiencies of Abuse, Exploitation, Neglect

These deficiencies are cited when the facility does not follow their policies and procedure when an allegation of either abuse, neglect or exploitation is made.

A decorative graphic consisting of several sets of concentric circles, resembling ripples in water, is located in the bottom right corner of the slide. The circles are light blue and vary in size and opacity, creating a subtle background element.

Examples

- Not reporting an allegation of abuse, neglect or exploitation to Adult Protection
- Not protecting the resident involved and other potential residents from further abuse, neglect or exploitation during the investigation.

Core Issues 2011

- 215.03 Operating for more than 30 days without a licensed administrator (6)
- 510 Abuse (6)
- 515 Exploitation (2)
- 520 Inadequate Care (35)
- 525 Neglect (3)

Top ten non-core/punch list deficiencies cited during Healthcare surveys in 2011

- 305.02 (35) Current Med Orders
- 260.06 (34) Housekeeping
- 335.03 (33) Universal Precautions
- 310.04.e (32) Psychotropic medication reviews and behavior updates
- 300.01 (32) Nurse assessment every 90 days and at change of condition

Top ten non-core/punch list deficiencies continued

- 250.10 (32) Hot water temperature
- 350.02 (29) Investigation and written response to complainant within 30 days
- 320.01 (28) Develop and implement NSA
- 350.04 (26) Written response to complainant
- 009.04 (25) Not submitting fingerprints to Criminal History Unit within 21 days of hire

Where Do Complaints Come From?

Family/Friend	29%
Current Staff	7%
Former Staff	12%
Anonymous	19%
Resident	6%
Other agency	28%

Frequency of Complaints

Complaints received in 2011: 184

RALFs: 349 Licensed Beds: 8809

Complaints per facility: .52

Complaints per 100 licensed beds: 2.08

For a 100 bed facility, 2 complaints per year would be average

For an 8 bed facility, @ 1 complaint every 6 years would be average

Complaint Intake

- Violation of rule (IDAPA 16.03.22)
- Direct Knowledge of incident

Complaint Priorities

Priority 1: IJ: 2 working days

serious injury, harm, impairment, or death to a resident

Priority 2: Non-IJ High: 60 calendar days

Alleges not in compliance with care requirements.

Priority 3: Non-IJ Low: 180 calendar days

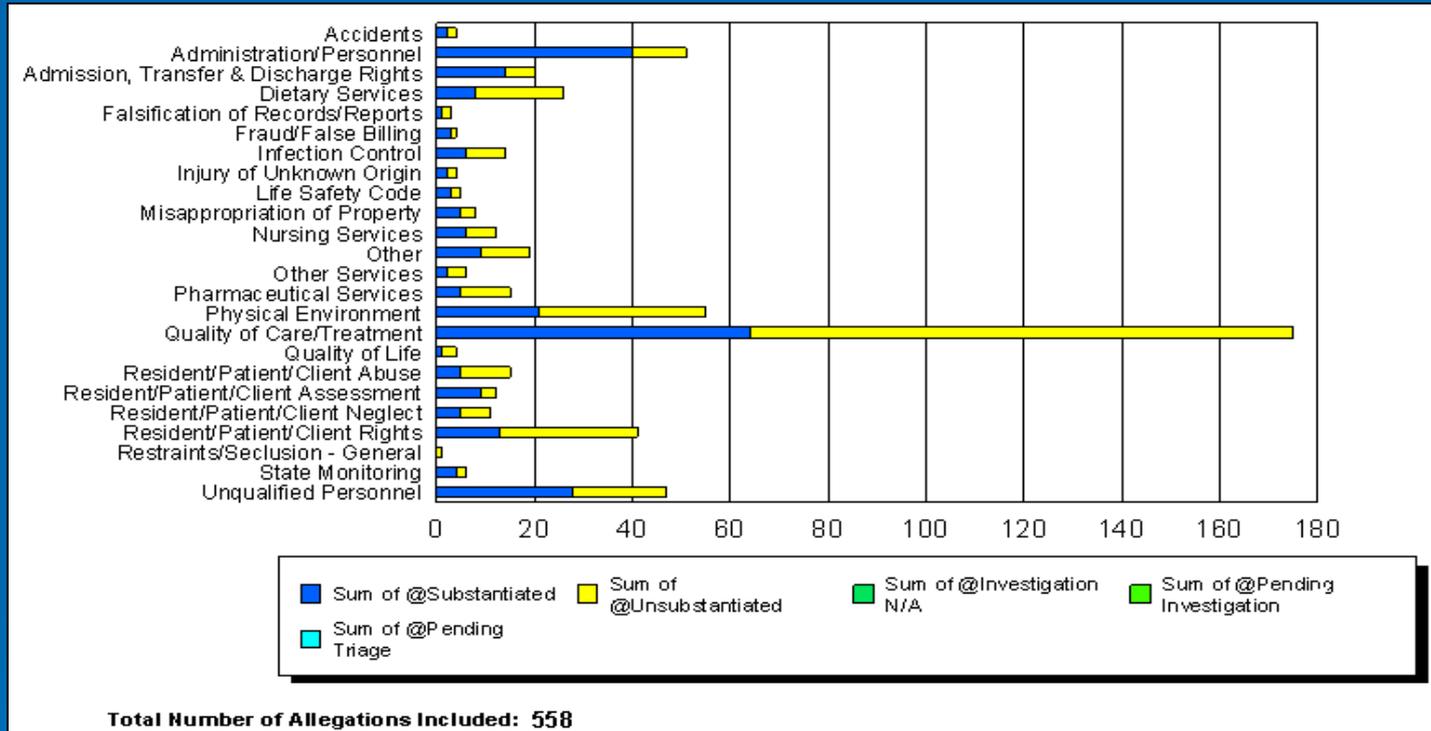
Represents non-compliance that does not directly affect resident care.

Complaint Investigations

Investigation

- Entrance, observations, interviews, record reviews, exit, investigation report, survey report

What % are Substantiated?



558 Allegations

256 (45%) substantiated

302 (54%) unable to substantiate or unsubstantiated

RALF PROGRAM'S ROLE

Through surveys and education we ensure facilities are following the IDAPA rules in order that residents receive quality care, but...



Working Together

When we work together (RALF Program, APS and Ombudsman), we can make a larger difference in the lives of all the residents who reside in Idaho's assisted living facilities.

